

<i>Index of Claims</i>	Application/Control No.		Applicant(s)/Patent Under Reexamination	
	10719953		LACOMB ET AL.	
	Examiner		Art Unit	
	BENJAMIN S FIELDS		3692	

<input checked="" type="checkbox"/>	Rejected	<input type="checkbox"/>	Cancelled	<input type="checkbox"/>	N	Non-Elected	<input type="checkbox"/>	A	Appeal
<input checked="" type="checkbox"/>	Allowed	<input type="checkbox"/>	Restricted	<input type="checkbox"/>	I	Interference	<input type="checkbox"/>	O	Objected

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA	<input type="checkbox"/> T.D.	<input type="checkbox"/> R.1.47
CLAIM						DATE
Final	Original	03/13/2009	09/16/2009	02/03/2010		
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